



THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Francis A. Ennis

Application No.: 09/159,172 Group: 1644

Filed: September 23, 1998 Examiner: D. Saunders

For: Predictive Assay for Immune Response

CERTIFICATE OF MAILING	
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to Assistant Commissioner for Patents, Washington, D.C. 20231	
on <u>5-18-00</u>	<u>Judy Breen</u>
Date	Signature
Judy Breen	
Typed or printed name of person signing certificate	

Assistant Commissioner for Patents
Washington, D.C. 20231

Sir:

Transmitted herewith is an Amendment for filing in the above-identified application.

- [] Small entity status of this application under 37 C.F.R. 1.9 and 1.27 has been established by a verified statement previously submitted.
- [] A verified statement to establish small entity status under 37 C.F.R. 1.9 and 1.27 is enclosed.

The fee has been calculated as shown below:

(COL. 1)			(COL. 2)		(COL. 3)	SMALL ENTITY			OTHER THAN SMALL ENTITY			
	CLAIMS REMAINING AFTER AMENDMENT			HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDIT. FEE	OR		RATE	ADDIT. FEE
TOTAL	19	MINUS	*	20	0	X	\$ 9	\$		X	\$18	\$ 0
INDEP	4	MINUS	**	4	0	X	\$39	\$		X	\$78	\$ 0
						+	\$130	\$		+	\$260	\$
FIRST PRESENTATION OF MULTIPLE DEP. CLAIM												

*

not fewer than 20

**

not fewer than 3

TOTAL

=

\$

0

TOTAL

=

\$

0

* not fewer than 20
** not fewer than 3

Please charge Deposit Account No. 08-0380 for the following fees:

<input type="checkbox"/>	Petition for [] month Extension of Time	\$	_____
<input type="checkbox"/>	Amendment Fee	\$	_____
<input type="checkbox"/>	Other Fees:		
	_____	\$	_____
	_____	\$	_____
	TOTAL:	\$	<u>0</u>


A check is enclosed in payment of the following fees:

<input checked="" type="checkbox"/>	Petition for three- month Extension of Time	\$	<u>870</u>
<input type="checkbox"/>	Amendment Fee	\$	_____
<input type="checkbox"/>	Other Fees:		
	_____	\$	_____
	_____	\$	_____
	TOTAL:	\$	<u>870</u>

☒ A general authorization is hereby granted to charge Deposit Account No. 08-0380 for any fees required under 37 C.F.R. 1.16 and 1.17 in order to maintain pendency of this application. A copy of this authorization is enclosed for accounting purposes.

Respectfully submitted,

HAMILTON, BROOK, SMITH & REYNOLDS, P.C.

By 
Carolyn S. Elmore
Registration No.: 37,567
Telephone: (781) 861-6240
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Lexington, Massachusetts 02421-4799

Dated: 5/18/00